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PATENT
Attorney Docket No.: 022274-000210US

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450



On

7/8/04

TOWNSEND and TOWNSEND and CREW LLP

By:

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

MILTON FULLER

Application No.: 10/823,017

Filed: April 12, 2004

For: METHOD AND APPARATUS FOR
NON-INVASIVE ANALYSIS OF
BLOOD GLUCOSE

Examiner:

Art Unit:

INFORMATION DISCLOSURE
STATEMENT UNDER 37 CFR §1.97 and
§1.98

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

The references cited on attached form PTO/SB/08A and PTO/SB/08B are being called to the attention of the Examiner. Copies of the references are enclosed. It is respectfully requested that the cited references be expressly considered during the prosecution of this application, and the references be made of record therein and appear among the "references cited" on any patent to issue therefrom.


As provided for by 37 CFR 1.97(g) and (h), no inference should be made that the information and references cited are prior art merely because they are in this statement and no

representation is being made that a search has been conducted or that this statement encompasses all the possible relevant information.

Applicant believes that no fee is required for submission of this statement.

However, if a fee is required, the Commissioner is authorized to deduct such fee from the undersigned's Deposit Account No. 20-1430. Please deduct any additional fees from, or credit any overpayment to, the above-noted Deposit Account.

Respectfully submitted,



Jonathan E. Vobe
Reg. No. 28,429

TOWNSEND and TOWNSEND and CREW LLP
Two Embarcadero Center, Eighth Floor
San Francisco, California 94111-3834
Tel: 858-350-6100
Fax:
JEJ:jcf
60254291 v1

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By:



PTO/SB/08A (08-03)

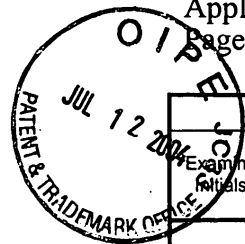
Substitute for form 1449A/PTO INFORMATION DISCLOSURE STATEMENT BY APPLICANT <i>(use as many sheets as necessary)</i>			Complete if Known		
			Application Number	10/823,017	
			Filing Date	April 12, 2004	
			First Named Inventor	Milton A. Fuller	
			Art Unit		
			Examiner Name		
Sheet	1	of	Attorney Docket Number		022274-000210US

U.S. PATENT DOCUMENTS+					
Examiner Initials*	Cite No. ¹	Document Number	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
		Number Kind Code ² (if known)			
	AA	US-6,723,048 B2	July 5, 2001	Milton A. Fuller	
	AB	US-5,072,732		Rapoport et al.	
	AC	US-4,875,486		Rapoport et al.	
	AD	US-5,411,023		Morris et al.	
	AE	US-5,626,137		Dumoulin et al.	
	AF	US-5,744,958		Werne	
	AG	US-6,184,684		Dumoulin et al.	
	AH	US-6,263,228		Zhang et al.	
	AI	US-6,477,398		Mills	
	AJ	US-			
	AK	US-			
	AL	US-			
	AM	US-			
	AN	US-			
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	AP	US-			
	AQ	US-			
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FOREIGN PATENT DOCUMENTS								
Examiner Initials*	Cite No. ¹	Foreign Patent Document			Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	T ⁶
		Country Code ³	Number ⁴	Kind Code ⁵ (if known)				

Examiner Signature	Date Considered
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EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. ¹ Applicant's unique citation designation number (optional). ² See Kind Codes of USPTO Patent Documents at www.uspto.gov or MPEP 901.04. ³ Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). ⁴ For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. ⁵ Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST. 16 if possible. ⁶ Applicant is to place a check mark here if English language Translation is attached.



FOREIGN PATENT DOCUMENTS								
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		Country Code ³	Number ⁴	Kind Code ⁵ (if known)				
	AU	FR	2,562,785			Jeandey et al.		<input type="checkbox"/>
	AV	JP	56-14145			Nippon Denshi K.K.		<input type="checkbox"/>
	AW	PCT	US00/355 54			Fuller		<input type="checkbox"/>
	AX							<input type="checkbox"/>
	AY							<input type="checkbox"/>
	AZ							<input type="checkbox"/>
	BA							<input type="checkbox"/>
	BB							<input type="checkbox"/>

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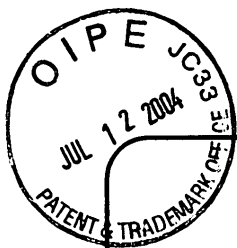
**NON PATENT LITERATURE DOCUMENTS**

Examiner Initials *	Cite No. ¹	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T ²
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¹ Applicant's unique citation designation number (optional). ² Applicant is to place a check mark here if English language Translation is attached.



PTO/SB/21 (02-04)

**TRANSMITTAL
FORM**

(to be used for all correspondence after initial filing)

Application Number	10/823,017
Filing Date	April 12, 2004
First Named Inventor	Milton A. Fuller
Art Unit	
Examiner Name	
Attorney Docket Number	022274-000210US

Total Number of Pages in This Submission

ENCLOSURES (Check all that apply)

- | | | |
|---|--|--|
| <input type="checkbox"/> Fee Transmittal Form
<input type="checkbox"/> Fee Attached
<input type="checkbox"/> Amendment/Reply
<input type="checkbox"/> After Final
<input type="checkbox"/> Affidavits/declaration(s)
<input type="checkbox"/> Extension of Time Request
<input type="checkbox"/> Express Abandonment Request
<input checked="" type="checkbox"/> Information Disclosure Statement
<input type="checkbox"/> Certified Copy of Priority Document(s)
<input type="checkbox"/> Response to Missing Parts/
Incomplete Application

<input type="checkbox"/> Response to Missing Parts
under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s)
<input type="checkbox"/> Licensing-related Papers
<input type="checkbox"/> Petition
<input type="checkbox"/> Petition to Convert to a
Provisional Application
<input type="checkbox"/> Power of Attorney, Revocation
Change of Correspondence Address
<input type="checkbox"/> Terminal Disclaimer
<input type="checkbox"/> Request for Refund
<input type="checkbox"/> CD, Number of CD(s) _____ | <input type="checkbox"/> After Allowance Communication
to Group
<input type="checkbox"/> Appeal Communication to Board
of Appeals and Interferences
<input type="checkbox"/> Appeal Communication to Group
(Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Status Letter
<input checked="" type="checkbox"/> Other Enclosure(s) (please
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Remarks

The Commissioner is authorized to charge any additional fees due to Deposit Account No. 20-1430.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Townsend and Townsend and Crew LLP Jonathan E. Jobe	Reg. No. 28,429
Signature		
Date	July 8, 2004	

CERTIFICATE OF TRANSMISSION/MAILING

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Typed or printed name	Julie C. Freiburger		
Signature		Date	July 8, 2004